Exhibit 300: Capital Asset Plan and Business Case Summary Part I: Summary Information And Justification (All Capital Assets)

Section A: Overview (All Capital Assets)

1. Date of Submission: 2010-03-19 08:37:19

2. Agency: 029

3. Bureau: 00

4. Name of this Investment: Medical 21st Century HealtheVet Scheduling-2011

5. Unique Project (Investment) Identifier: 029-00-01-11-01-1182-00

- 6. What kind of investment will this be in FY 2011?: Planning
 - Planning
 - Full Acquisition
 - Operations and Maintenance
 - Mixed Life Cycle
 - Multi-Agency Collaboration
- 7. What was the first budget year this investment was submitted to OMB? *
- 8. Provide a brief summary and justification for this investment, including a brief description of how this closes in part or in whole an identified agency performance gap; this description may include links to relevant information which should include relevant GAO reports, and links to relevant findings of independent audits.

In August 2009, OI&T was instructed to create a new HealtheVet (HeV) Scheduling program that would take into consideration important business process changes, technical enhancements, and overall organization realignments since 2001 as the program moves forward. All program aspects are being re-analyzed, such as cost, schedule, resources, risks, and lifecycle methodology. Once the program is authorized, HeV Scheduling will fulfill enterprise-level scheduling needs and align to the 21st-century. HeV Scheduling goals are to deliver an enterprise-level outpatient scheduling application (close an agency gap of creating a One-VA Patient medical record); align investment to Federal Enterprise Architecture (FEA) Business Reference Model BRM Services to Citizens, LoB 110 Health (Access to Care). HeV Scheduling also support VAs Strategic Goal: restore capability of Veterans to greatest extent possible and improve quality of their lives, as well as VAs Enabling Goal: deliver world class service to Veterans and their families. Delivery of HeV Scheduling will enable providers to see patient history across VA, regardless of location, and improve clinical efficiency by adopting a resource-based model to integrate providers, rooms, and equipment. It will also reduce return appointments and wait times by enabling more capacity for care and enable clinicians to link ancillary appointments that move if the patient cancels or reschedule. Other features include: group scheduling, integrated electronic wait lists, and patient preferences (used when searching for appointments). It will reduce no-show rates by managing patient preferences and the enhanced appointment reminder process. Patients will also be able to view and request appointments on-line which will allow inter-facility scheduling to further coordinate care between facilities. The approved budget figures for FY 2009-2011 from the paused Scheduling Project were used. Budget figures for FY 2012-2019 assume project completion in FY 2019. Although, a rough order of magnitude estimate was prepared based on one of the AoA alternatives, all sections will be revisited and aligned to the alternative selected. Performance metrics for FY 2010-2014 will be entered at that time.

a. Provide here the date of any approved rebaselining within the past year, the date for the most recent (or planned)alternatives analysis for this investment, and whether this investment has a risk management plan and risk register.

- 9. Did the Agency's Executive/Investment Committee approve this request? * a.If "yes," what was the date of this approval? *
- 10. Contact information of Program/Project Manager?
 - Name: *
 - Phone Number: *
 - Email: *
- 11. What project management qualifications does the Project Manager have? (per FAC-P/PM)? *
 - Project manager has been validated according to FAC-PMPM or DAWIA criteria as qualified for this investment.
 - Project manager qualifications according to FAC-P/PM or DAWIA criteria is under review for this investment.
 - Project manager assigned to investment, but does not meet requirements according to FAC-P/OM or DAWIA criteria.
 - Project manager assigned but qualification status review has not yet started.
 - No project manager has yet been assigned to this investment.

12. If this investment is a financial management system, then please fill out the following as reported in the most recent financial systems inventory (FMSI):

Financial management system name(s)	System acronym	Unique Project Identifier (UPI) number		
*	*	*		

- a. If this investment is a financial management system AND the investment is part of the core financial system then select the primary FFMIA compliance area that this investment addresses (choose only one): *
 - computer system security requirement;
 - o internal control system requirement;
 - core financial system requirement according to FSIO standards;
 - Federal accounting standard;
 - U.S. Government Standard General Ledger at the Transaction Level;
 - this is a core financial system, but does not address a FFMIA compliance area;
 - Not a core financial system; does not need to comply with FFMIA

Section B: Summary of Funding (Budget Authority for Capital Assets)

1.

Table 1: SUMMARY OF FUNDING FOR PROJECT PHASES (REPORTED IN MILLIONS) (Estimates for BY+1 and beyond are for planning purposes only and do not represent budget decisions)										
	PY1 and earlier	PY 2009	CY 2010	BY 2011	BY+1 2012	BY+2 2013	BY+3 2014	BY+4 and beyond	Total	
Planning:	*	*	*	*	*	*	*	*	*	
Acquisition:	*	*	*	*	*	*	*	*	*	
Subtotal Planning & Acquisition:	*	*	*	*	*	*	*	*	*	
Operations & Maintenance :	*	*	*	*	*	*	*	*	*	
Disposition Costs (optional):	*	*	*	*	*	*	*	*	*	
SUBTOTAL:	*	*	*	*	*	*	*	*	*	
		Government F	TE Costs sh	ould not be ir	ncluded in the	amounts pro	ovided above.			
Government FTE Costs	*	*	*	*	*	*	*	*	*	
Number of FTE represented by Costs:	*	*	*	*	*	*	*	*	*	
TOTAL(inclu ding FTE costs)	*	*	*	*	*	*	*	*	*	

2. If the summary of funding has changed from the FY 2010 President's Budget request, briefly explain those changes:

*

Section C: Acquisition/Contract Strategy (All Capital Assets)

1.

	Table 1: Contracts/Task Orders Table											
Contract or Task Order Number	Type of Contract/Task Order (In accordance with FAR Part 16)	Has the contr act been awar ded (Y/N)	If so what is the date of the award? If not, what is the planned award date?	Start date of Contract/T ask Order	End date of Contract/T ask Order	Total Value of Contract/ Task Order (M)	Is this an Inter agen cy Acqu isitio n? (Y/N)	Is it perfo rman ce base d? (Y/N)	Com petiti vely awar ded? (Y/N)	What, if any, alternative financing option is being used? (ESPC, UESC, EUL, N/A)	the	
FY10 RSA - Analysis of Alternative (AoA) Support	Firm Fixed Price	Y	2010-01-05	2010-01-05	2010-05-07	\$0.2	*	*	*	*	*	
FY10 Austin Information Technology Center (AITC)	Time and Materials	Y	2008-10-01	2008-10-01	2009-10-31	\$0.0	*	*	*	*	*	
FY10 VISN17 Support	Firm Fixed Price	Υ	2009-05-18	2009-05-18	2010-09-30	\$0.0	*	*	*	*	*	

- 2. If earned value is not required or will not be a contract requirement for any of the contracts or task orders above, explain why:
- 3. Is there an acquisition plan which reflects the requirements of FAR Subpart 7.1 and has been approved in accordance with agency requirements? *
 - a.If "yes," what is the date? *

Section D: Performance Information (All Capital Assets)

Table 1: Performance Information Table											
Fiscal Year	Strategic Goal(s) Supported	Measurement Area	Measurement Grouping	Measurement Indicator	Baseline	Target	Actual Results				
2010	Public Health & Socioeconomic Wellbeing	*	*	Planning-Provid e a completed and current Analysis of Alternatives	No current (post 2002) analysis of alternatives exists	Analysis of Alternatives 100% complete which details potential directions VA could pursue in the delivery of an enterprise-wide scheduling application	FY10				
2010	Honor & Memorialize	•	*	Compliance-Del iver a program level acquisition strategy	No current Acquisition Strategy exists	Acquisition Strategy defined with continuous monitoring plan and aligned to alternative selected	FY10				
2010	Honor & Memorialize	*	*	Process-Progra m aligned to PMAS (incremental development) to focus on near-term, small deliveries of new capabilities to our internal customers	No current strategy exists to align program to PMAS	Program fully (100%) aligns to incremental delivery and milestone management (PMAS)	FY10				
2010	Honor & Memorialize	•	•	Incremental delivery (TBD); refer to FY15 for description of ultimate strategic goal	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a baseline established	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a target established	TBD FY10				
2011	Public Health & Socioeconomic Wellbeing	*	*	Incremental delivery (TBD); refer to FY15 for description of ultimate strategic goal	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a baseline established	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a target established	TBD FY11				
2011	Honor & Memorialize	•	*	Incremental delivery (TBD); refer to FY15 for description of ultimate strategic goal	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a baseline	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a target	TBD FY11				

		Tab	ole 1: Performand	ce Information Ta	ble		
Fiscal Year	Strategic Goal(s) Supported	Measurement Area	Measurement Grouping	Measurement Indicator	Baseline	Target	Actual Results
					established	established	
2011	Public Health & Socioeconomic Wellbeing	*	*	Incremental delivery (TBD); refer to FY15 for description of ultimate strategic goal	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a baseline established	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a target established	TBD FY11
2011	Honor & Memorialize	*	*	Incremental delivery (TBD); refer to FY15 for description of ultimate strategic goal	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a baseline established	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a target established	TBD FY11
2012	Public Health & Socioeconomic Wellbeing	*	*	Incremental delivery (TBD); refer to FY15 for description of ultimate strategic goal	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a baseline established	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a baseline established	TBD FY12
2012	Honor & Memorialize	*	•	Incremental delivery (TBD); refer to FY15 for description of ultimate strategic goal	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a baseline established	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a baseline established	TBD FY12
2012	Public Health & Socioeconomic Wellbeing	*	*	Incremental delivery (TBD); refer to FY15 for description of ultimate strategic goal	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a baseline established	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a baseline established	TBD FY12
2012	Honor & Memorialize	•	٠	Incremental delivery (TBD); refer to FY15 for description of ultimate strategic goal	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a	TBD FY12

		Tab	ole 1: Performan	ce Information Ta	ble		
Fiscal Year	Strategic Goal(s) Supported	Measurement Area	Measurement Grouping	Measurement Indicator	Baseline	Target	Actual Results
					baseline established	baseline established	
2013	Public Health & Socioeconomic Wellbeing	*	*	Incremental delivery (TBD); refer to FY15 for description of ultimate strategic goal	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a baseline established	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a baseline established	TBD FY13
2013	Honor & Memorialize	*	*	Incremental delivery (TBD); refer to FY15 for description of ultimate strategic goal	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a baseline established	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a baseline established	TBD FY13
2013	Public Health & Socioeconomic Wellbeing	*	*	Incremental delivery (TBD); refer to FY15 for description of ultimate strategic goal	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a baseline established	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a baseline established	TBD FY13
2013	Honor & Memorialize	*	*	Incremental delivery (TBD); refer to FY15 for description of ultimate strategic goal	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a baseline established	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a baseline established	TBD FY13
2014	Public Health & Socioeconomic Wellbeing	*	*	Incremental delivery (TBD); refer to FY15 for description of ultimate strategic goal	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a baseline established	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a baseline established	TBD FY14
2014	Honor & Memorialize	*	•	Incremental delivery (TBD); refer to FY15 for description of ultimate strategic goal	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be	TBD FY14

Table 1: Performance Information Table									
Fiscal Year	Strategic Goal(s) Supported	Measurement Area	Measurement Grouping	Measurement Indicator	Baseline	Target	Actual Results		
					defined and a baseline established	defined and a baseline established			
2014	Public Health & Socioeconomic Wellbeing	•	*	Incremental delivery (TBD); refer to FY15 for description of ultimate strategic goal	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a baseline established	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a baseline established	TBD FY14		
2014	Honor & Memorialize	•	•	Incremental delivery (TBD); refer to FY15 for description of ultimate strategic goal	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a baseline established	Once an alternative is selected (FY10), an incremental benefit for this Measurement Area will be defined and a baseline established	TBD FY14		
2015	Public Health & Socioeconomic Wellbeing	•	•	Health Care Services-Increa se availability of same day care while reducing return appointments and wait times	No standard or approved capability exists for clinics to be able to reserve appointment times (slots) for future same day care; the actual results for FY15 will set the baseline	% of appointments that are set aside for same day care (target to be set once an alternative is selected)	TBD FY15		
2015	Honor & Memorialize	·	•	Availability-Pati ent's ability to view and request appointments online while minimizing no-show rates	No standard or approved capability exists for the patient to view or request appointments online; the actual results for FY15 will set the baseline	% of patients are able to securely view or request their appointments online (target to be defined once an alternative is selected)	TBD FY15		

Part II: Planning, Acquisition And Performance Information

Section A: Cost and Schedule Performance (All Capital Assets)

	1. Compa	arison of Actu	al Work Comple	eted and Actua	I Costs to Curr	ent Approved I	Baseline	
Description of Milestones	Planned Cost (\$M)	Actual Cost (\$M)	Planned Start Date	Actual Start Date	Planned Completion Date	Actual Completion Date	Planned Percent Complete	Actual Percent Complete
Non-Work Time / Non-Project Time (NWT/NPT) - FY2010-2014	\$17.3	\$0.2	2009-10-01	2009-10-01	2014-09-30		0.00%	0.00%
Planning - Alternatives of Analysis (AoA)	\$0.2	\$0.2	2009-09-18	2009-09-18	2010-03-31	2010-03-31	0.00%	0.00%
Decision - Alternative Selected (Sec VA)	\$0.0	\$0.0	2010-04-05	2010-04-01	2010-04-16	2010-05-14	0.00%	0.00%
Planning - Planning and Analysis	\$9.3	\$2.1	2009-10-01	2009-09-18	2010-09-30		0.00%	0.00%
Planning - Approval to Proceed (PMAS)	\$1.4	\$0.1	2010-04-19	2009-10-01	2010-09-30		0.00%	0.00%
Execute - Reporting and Monitoring	*	*	2010-04-01		2014-09-30		0.00%	0.00%
Execute - Integrated Project Team (IPT)	*	*	2010-04-01		2014-09-30		0.00%	0.00%
Execute - Incremental Solution Construction	*	*	2010-10-01		2014-09-30		0.00%	0.00%
Execute - Training and Site Preparedness	*	*	2012-09-03		2014-09-30		0.00%	0.00%
Non-Work Time / Non-Project Time (NWT/NPT) - FY2015-2019	*	٠	2012-09-03		2014-09-30		0.00%	0.00%
Complete - Final Incremental Solution Delivery	*	*	2014-02-03		2014-09-30		0.00%	0.00%
Operations and Maintenance - FY2015-2019	*	*	2015-10-01		2019-09-30		0.00%	0.00%

* - Indicates data is redacted.